

FORTY-FIFTH ANNUAL REPORT

of the

Mass. DEPARTMENT OF PUBLIC HEALTH

July 1, 1958 to June 30, 1959

For sale by the
State of Massachusetts
Department of Public Health
Boston, Massachusetts

2
m

STATE LIBRARY OF MASSACHUSETTS

NOV 24 1959

STATE HOUSE, BOSTON

MASS OFFICIALS

614M3
579r
1958-59
MASSACHUSETTS DEPARTMENT OF PUBLIC HEALTH

June 30, 1959

Commissioner of Public Health, Alfred L. Frechette, M.D., M.P.H.

PUBLIC HEALTH COUNCIL

Alfred L. Frechette, M.D., M.P.H., Chairman

Conrad Wesselhoeft, M.D., 1953-60 William H. Griffin, D.M.D., 1945-63
Paul J. Jakmauh, M.D., 1949-61 Charles F. Wilinsky, M.D., 1946-64
Gordon M. Fair, B.S., Dr. Ing., 1956-62 Raymond L. Mutter, B.S., R.S., 1947-65
Florence L. Wall, Secretary

BUREAU OF ADMINISTRATION

Division of Administration Harry W. Attwood, Director
Division of Health Information Anthony V. Caramello, M.P.H., Director
Division of Training Dwight C. Monnier, Ed.D., Director

BUREAU OF HEALTH SERVICES

Robert E. Archibald, M.D., M.P.H., Bureau Chief

Division of Local Health Services Robert E. Archibald, M.D., M.P.H.,
Director and Deputy Commissioner
Division of Maternal and Child Sallie Saunders, M.D., Director
Health Services

BUREAU OF HOSPITAL FACILITIES

A. Daniel Rubenstein, M.D., M.P.H., Bureau Chief

Division of Hospital Facilities A. Daniel Rubenstein, M.D., M.P.H.
Director

BUREAU OF PREVENTIVE DISEASE CONTROL

Herbert L. Lombard, M.D., M.P.H., Bureau Chief

Division of Cancer and Chronic Herbert L. Lombard, M.D., M.P.H.
Diseases Director
Division of Communicable Diseases Roy F. Feemster, M.D., Dr.P.H.
Director
Division of Venereal Diseases Nicholas J. Fiumara, M.D., M.P.H.,
Director
Division of Dental Health William D. Wellock, D.M.D., M.P.H.
Director
Division of Alcoholism James B. Moloney, M.D., Director

BUREAU OF ENVIRONMENTAL SANITATION
Worthen H. Taylor, B.S., Bureau Chief

Division of Sanitary Engineering	Worthen H. Taylor, B.S., Director
Division of Food and Drugs	George A. Michael, B.S., Director

BUREAU OF TUBERCULOSIS CONTROL
William H. Weidman, M.D., Bureau Chief

Division of Sanatoria and Tuberculosis	William H. Weidman, M.D., Director
--	------------------------------------

BUREAU OF INSTITUTE OF LABORATORIES
Johannes Ipsen, M.D., M.P.H., Bureau Chief

Division of Biologic Laboratories	James A. McComb, D.V.M., Director
Division of Diagnostic Laboratories	Robert A. MacCready, M.D., Director

District Health Officers under Division of Local Health Services

Southeastern District Lakeville State Sanatorium Middleboro	Grace E. Lutman, M.D., Dr.P.H.
Northeastern District North Reading State Sanatorium North Wilmington	Frederick A. Dunham, M.D., M.P.H.
Central District Rutland State Sanatorium Rutland	Arthur E. Burke, M.D., M.P.H.
Western District University of Massachusetts Amherst and 246 North Street, Pittsfield	Walter W. Lee, M.D., M.P.H.

Institutions under Division of Sanatoria and Tuberculosis

Lakeville State Sanatorium	George L. Parker, M.D., Superintendent
North Reading State Sanatorium	Roland R. Cartier, M.D., Superintendent
Rutland State Sanatorium	Paul Dufault, M.D., Superintendent
Westfield State Sanatorium	Wilson W. Knowlton, M.D., Superintendent
Pondville Hospital	Claire W. Twinam, M.D., Superintendent
Lemuel Shattuck Hospital	William H.H. Turville, M.D., Superintendent
Massachusetts Hospital School	John J. Carroll, M.D., Superintendent
Tewksbury Hospital	Thomas Saunders, Superintendent

ANNUAL REPORT OF PUBLIC HEALTH COUNCIL

Alfred L. Frechette, M.D., M.P.H., Chairman

Herewith is submitted the annual report of the Public Health Council for the fiscal year ending June 30, 1959.

Meetings

Regular monthly meetings were held in accordance with General Laws, Chapter 17, Section 3. In accordance with the provisions of Chapter 626 of the Acts of 1958, notices of all regular and special meetings were filed with the Commissioner of Administration and Finance and with the Secretary of State.

The July 8, 1958 meeting was held at Rutland State Sanatorium. In connection with the meeting an inspection was made of the improvements under way at the Sanatorium, including the creation of single rooms for patients to replace many of the wards, the installation of fire walls, etc., and the quarters provided for recalcitrant tuberculosis patients under the provisions of Chapter 615 of the Acts of 1957 which authorized the establishment of a treatment center for patients who need hospitalization but are uncooperative in remaining under treatment and thus become a menace to the public health. The office of the Central District, located at Rutland, was visited by the Council and the work and particular problems of the District were discussed with the District Health Officer and members of the staff.

The August 12, 1958 meeting was held at Edgartown and included an inspection of the 38-bed Martha's Vineyard Hospital at Oak Bluffs where the Superintendent conducted the Council on a tour of inspection, particularly of the additions made possible by a grant of Federal funds by this Department a few years previously. The next day the Council visited the new Nantucket Cottage Hospital which in 1956 also received an allotment from the Federal Hospital Survey and Construction grant. A detailed inspection was made of the medical, surgical, obstetrical and pediatric wards, as well as the administrative, housekeeping and maintenance units.

Another special meeting was held on July 9, 1958 at the Western District Office at Amherst where the facilities provided for this office at the new Health Center Building were inspected and local problems discussed with the District Health Officer. On this same date the Council visited Westfield State Sanatorium and viewed the institution programs which were not in effect at the time of the Council's last visit in 1953.

A third special meeting, on January 22, 1959, was held primarily to advise the Commissioner on pressing personnel problems in the Department and at Lemuel Shattuck Hospital.

The Committee on Environmental Sanitation, composed of Dr. Jakmauh, Chairman, Mr. Mutter and the Commissioner, has met regularly during the year prior to the regular Council meetings to study matters of sanitary significance and prepare recommendations for presentation to the full meeting of the Council.

Early in 1959 a Committee on Hospital Problems, composed of Dr. Wilinsky, Dr. Wesselhoeft, Dr. Jakmauh and Dr. Griffin, was appointed by the Chairman to consider and advise on general and specific problems connected with the Department's institutions. Subsequently this Committee met four times, including a visit to Tewksbury Hospital on June 19, 1959.

General Duties

The regular duties imposed upon the Council by General Laws, Chapter 111, Section 3, and other statutes have been carried out. The licensure program includes the approval and licensing of hospitals, blood banks, convalescent and nursing homes, rest homes, public medical institutions, city and town infirmaries, dispensaries and dental clinics, and medical schools and laboratories to obtain impounded animals; these approvals are based upon reports of inspections by members of the Department who inspect to ascertain if the facilities comply with the Department's minimum standards for licensure. Other duties include the certification of laboratories which have taken part in the annual evaluation carried on by the Institute of Laboratories and have demonstrated their ability to perform satisfactorily certain tests; approval of professional personnel at State, county and municipal sanatoria; approval of food regulations of local communities; advice to communities and official agencies on sanitary problems of water supply, sewage disposal, nuisances and offensive trades, and the prevention of pollution of inland and tidal waters; and approval of out-of-state shellfish dealers which have been approved by their respective state authorities.

Contracts and agreements were approved and signed on behalf of the Commonwealth with Harvard University School of Public Health concerning an Institute on Leukemia and Other Malignant Neoplasms; with the city of Springfield for the care of tuberculosis patients from that city at State sanatoria; with Hampden County Commissioners for the care of tuberculosis patients from Hampden County Hospital District at Westfield, Rutland and Lakeville State Sanatoria; and with Lynn Hospital relative to the operation of the Lynn Crippled Children's Clinic.

Renewal agreements between the Counties of Dukes and Barnstable, between the Counties of Nantucket and Barnstable and between Worcester County and the city of Worcester, for the care of tuberculosis patients, were approved.

Special Matters

This year witnessed several changes in the superintendencies of the Department's institutions. In November, 1958 Dr. George L. Parker was appointed as Superintendent of Lakeville State Sanatorium in place of Dr. Harry A. Clark who had retired; Dr. Claire W. Twinam was appointed as Superintendent of Pondville Hospital in place of Dr. Parker; and Dr. Roland R. Cartier was appointed as Superintendent of North Reading State Sanatorium in place of Dr. Twinam.

In April, 1959, the towns of Dunstable, Tyngsborough and Westford, which in May, 1956 had been transferred from the Central Health District to the Northeastern Health District to conform to civil defense areas, were returned to the Central Health District because of another shift in civil defense boundaries.

On February 10, 1959 a policy establishing the method and conditions for admission to Tewksbury Hospital was adopted by the Council.

Considerable attention was given to what is included in the term "medical center", and on May 12, 1959, under authority of General Laws, Chapter 111, Sections 71 to 73, the term "medical center" was defined as an institution composed of several hospitals or a single large hospital offering a variety of medical services, including an out-patient service.

Public Hearings

Under authority of General Laws, Chapter 111, Section 3, the Director of the Division of Sanitary Engineering was delegated to conduct public hearings on the acquisition of lands for sewage treatment plants in Brockton, Chicopee, Oxford-Rochdale, Billerica, Auburn and Sunderland; on the acquisition of land for protection of public water supplies of Canton and Cohasset; and on alleged nuisance conditions in the vicinity of a dump in Lee.

Under the provisions of Chapter 30A of the General Laws (the State Administrative Procedure Act) the Director of Hospital Facilities before recommending to the Public Health Council the revocation of a license or denial of a relicensure to a hospital because of non-compliance with the Department's standards for licensure, gave such hospital or home an opportunity to be heard to show cause why such action should not be taken.

The Director of Food and Drugs held a hearing on an additional regulation relative to Frozen Desserts and Ice Cream Mix.

The information presented at hearings held by Division Directors was presented to subsequent meetings of the Council for action.

Regulations

At a meeting on June 9, 1959 the Department's Rules and Regulations relative to Frozen Desserts and Ice Cream Mix were amended, under authority of General Laws, Chapter 94, Section 65, following a public hearing held under the State Administrative Procedure Act.

Legislative Reports

Reports prepared by the Department were approved by the Council and filed with the Legislature under authority of various resolves, as follows:

Relative to equine encephalitis, under Chapter 111 of the Resolves of 1958;

Relative to the regulation and control of radioactive materials and other sources of ionizing radiation, under Chapter 94 of the Resolves of 1958;

Relative to a ward for the treatment of certain persons in the Lemuel Shattuck Hospital, under Chapter 145 of the Resolves of 1958.

Hospital Survey and Construction

During the fiscal year approval was given to applications from the following hospitals and homes for financial assistance from Federal funds allotted to the Commonwealth by the Surgeon General of the Public Health Service under the Hospital and Medical Facilities Survey and Construction Act; in some instances they represent additional grants given because of increased cost of construction as evidenced by the bids received or because it was found on further investigation that the facility was eligible for additional funds:

Armenian Nursing Home, Jamaica Plain
Jordan Hospital, Plymouth
Cooley Dickinson Hospital, Northampton
Goddard Memorial Hospital, Stoughton
Pittsfield General Hospital, Pittsfield

Haverhill Municipal Hospital, Haverhill
Jewish Memorial Hospital, Boston
North Shore Babies Hospital, Salem
Falmouth Hospital, Falmouth
Framingham Union Hospital, Framingham

Stephen Caldwell Nursing Home, Ipswich
Wesson Maternity Hospital, Springfield
Addison Gilbert Hospital, Gloucester
Union Hospital, Fall River
Whidden Memorial Hospital, Everett

Lowell General Hospital, Lowell
Wing Memorial Hospital, Palmer
Beverly Hospital, Beverly
Holy Ghost Hospital, Cambridge

On May 12, 1959 the Council agreed that in future controversial instances coming before the Department in the matter of Federal allotments for hospital construction or other projects under the program, before a decision is made a sub-committee of the State Advisory Council for the Administration of the Hospital and Medical Facilities Survey and Construction Act be invited to appear before the Council to present its opinion.

Personnel

Upon appointment by His Excellency Governor Foster Furcolo, Dr. Alfred L. Frechette on January 12, 1959 assumed the position of Commissioner of Public Health and, therefore, under the provisions of General Laws, Chapter 17, Section 3, became ex officio Chairman of the Public Health Council.

During the fiscal year Dr. William H. Griffin of Boston and Mr. Raymond L. Mutter of Holyoke were appointed by Governor Furcolo to their third consecutive terms as Public Health Council Members.

At the close of the fiscal year, June 30, 1959, the membership of the Public Health Council was as follows:

Alfred L. Frechette, M.D., M.P.H., Chairman
Conrad Wesselhoeft, M.D., 1953-60
Paul J. Jakmauh, M.D., 1949-61
Gordon M. Fair, B.S., Dr.Ing., 1956-62
William H. Griffin, D.M.D., 1945-63
Charles F. Wilinsky, M.D., 1946-64
Raymond L. Mutter, B.S., R.S., 1947-65

Acceptance of Report

At a meeting of the Department on November 10, 1959, the Commissioner presented to the Council a report of the Department of Public Health for the fiscal year 1959, and it was voted that the report, together with the foregoing brief summary of the activities of the Public Health Council, be approved and adopted as the report of the Department of Public Health for the fiscal year 1959.

FORTY-FIFTH ANNUAL REPORT OF THE COMMISSIONER OF PUBLIC HEALTH

To the Public Health Council:

Gentlemen:

I have the honor to submit the forty-fifty annual report of the Department of Public Health for the fiscal year ending June 30, 1959.

During the first half of the period of this report Dr. Roy F. Feemster was Commissioner of Public Health. Dr. Alfred L. Frechette, being appointed and duly qualified by His Excellency Governor Foster Furcolo, on January 12, 1959 assumed the position of Commissioner of Public Health.

BUREAU OF ADMINISTRATION

On the first Monday of each month the Commissioner has held staff conferences with the Division Directors to discuss Department policies and administrative procedures. A half-day meeting for the entire Department staff was held on March 19, 1959.

In compliance with the annual request of the Surgeon General, Governor Furcolo authorized the Commissioner to attend the Annual Conference of State Health Officers with the Surgeon General of the Public Health Service and with the Chief of the Children's Bureau in Washington, and the Annual Meeting of the American Public Health Association in St. Louis.

The Department has maintained a close working relationship with the Massachusetts Medical Society, the Massachusetts Dental Society, the Massachusetts Public Health Association and other official and professional organizations to develop and coordinate public health programs throughout the Commonwealth by unified planning.

In May, 1959 a new non-profit corporation to be known as the Massachusetts Health Research Institute, Inc. was organized, with the deans of the three local medical schools and the school of public health and the President of the Massachusetts Medical Society included on its Board of Directors. This corporation, by receiving funds and allocating them for research, will facilitate, encourage and strengthen the research programs of the Department conducted at the various institutions. The Commissioner of Public Health was elected President of this corporation.

Department Space

The problem of cramped, inadequate and scattered housing of the Department offices which has confronted the Department for many

7

years, continues. At the present time five divisions and three sections of the Department, exclusive of the laboratories, are located in Boston in rented quarters outside the State House. Adequate space in a single building is necessary to permit efficient operation of the Department's programs and provide the adequate health services which the public has a right to expect. In the spring of 1959 considerable attention was given by all Division Directors to Special Survey Analysis Forms on which was indicated the space each division would require in the proposed new State Office Building, as part of a study being made in connection with plans for this building.

Boards and Commissions

By various statutes the Commissioner of Public Health is a member of the following boards or commissions: Council for the Aging, Commission on Alcoholism, Approving Authority for Medical Schools, Approving Authority for Schools for Medical Laboratory Technicians, Approving Authority for Schools for X-ray Technicians, Milk Regulation Board, New England Interstate Water Pollution Control Commission, Rating Board, Commission on Rehabilitation, Water Resources Commission and Weather Amendment Board. As it is obviously impossible for one person to attend all meetings of so many boards, the Commissioner attended personally as many meetings as possible and designated various staff members to attend others, so that the Department was represented at all meetings of these commissions.

Medical Panels

Section 6 of Chapter 32 of the General Laws authorizes the Commissioner of Public Health to appoint chairmen of medical panels to review applications from and examine State and municipal employees applying for disability retirement. The chairman of each panel, insofar as is possible, must be a physician skilled in the particular branch of medicine or surgery upon which the applicant bases his application for disability retirement. The other two members of the panel are selected by the applicant and the local retiring authority.

During the year covered by this report, 644 new applications were received and processed. This is the lowest number of new applications in any one year since the law giving the Department this responsibility went into effect in 1951. However, because of the inability or unwillingness of one or more panel members to serve, 56 of these applications had to be processed twice, 12 were processed three times, and three had to be processed four times, adding considerably to the administrative work involved in the selection of panels.

In addition to medical panels for applicants for disability retirement, upon application for an annuity made by the widow of a firefighter or police officer or certain other employees whose work involves considerable risk, under Section 89 of Chapter 32

of the General Laws the Department designates the third member of a board to determine whether or not the death of said employee was the result of an injury received in the performance of his duty. Annually about fifty such applications are received and processed.

Rating Board

The State Police Retirement Rating Board interviewed four men who had applied for retirement because of illness or injury received in line of duty. After examination of the applicants and review of their records, three of these applicants were recommended for disability retirement.

Two State Police Detective Lieutenants were examined and found to be physically fit to continue for another year. This duty of the Rating Board whereby State Police Detective Lieutenants upon reaching the age of fifty-five or completing twenty years of service were required to have an annual physical examination to determine their fitness to continue working to the compulsory retirement age of sixty-five, was terminated by the passage of Chapter 589 of the Acts of 1958, which transferred these officers to a different classification group under the retirement law.

White House Conference

As the fiscal year closed arrangements were being made for the State's participation in the White House Conference on Children and Youth to be held in Washington in 1960. A Massachusetts Committee was appointed by Governor Furcolo in May, 1959, with Dr. Martha M. Eliot as Chairman. The objectives of this Committee are twofold: to study the needs of children in the Commonwealth and make recommendations as to action required to meet these needs; and to participate in the work of preparation for the 1960 White House Conference. Departmental participation and cooperation with this Committee will be intensified during the next fiscal year.

Regulations

The following rules and regulations have been promulgated by the Department and are still in effect:

Distribution of biologic products

Adopted 4/9/35; amended 5/14/40; 1/11/49; 12/15/53

Sale of surplus biologic products

Adopted 4/12/49; amended 4/15/53

Use of blood or other tissues for purposes of transfusion

Adopted 1/10/39; amended 4/10/39; 10/7/41; 11/4/41; 9/14/48; 3/11/52; 6/12/56

Cancer clinics and service unit values

Adopted 8/12/26; amended 6/14/27; 3/13/28; 1/5/35; 9/14/43; 10/5/43; 11/1/43; 12/14/43; 4/11/44; 1/14/47; 10/18/55

List of diseases dangerous to public health

Adopted 1907; amended 12/15/14; 12/14/15; 2/16/17; 4/3/17; 12/18/17; 10/29/18; 11/18/20; 12/8/21; 9/18/28; 6/11/35; 12/10/35; 11/10/36; 2/14/39; 5/1/41; 5/12/42; 4/14/43; 10/5/43; 12/14/43; 1/11/44; 11/3/48

Diseases declared to be dangerous to the public health and reportable

Adopted 1907; amended 12/15/14; 12/14/15; 2/16/17; 4/3/17; 12/18/17; 10/29/18; 11/18/20; 12/8/21; 9/18/28; 6/11/35; 12/10/35; 11/10/36; 2/14/39; 5/1/41; 5/12/42; 4/14/43; 10/5/43; 12/14/43; 1/11/44; 11/3/48

Isolation and quarantine requirements of diseases declared to be dangerous to public health

Adopted 8/9/38; amended 5/13/41; 1/11/44; 11/3/48; 8/12/52

Transportation of bodies dead of diseases dangerous to public health

Adopted 7/12/38; amended 8/9/38; 2/14/39

Funerals of persons dead of any disease dangerous to public health

Adopted 8/9/38; amended 5/13/41; 1/11/44

Procurement of impounded animals from animal pounds for purpose of scientific investigation, experiment or instruction, or for the testing of drugs or medicines

Adopted 12/10/57

Cremation

Adopted 12/5/07; amended 10/29/18

Treatment of persons exposed to rabies

Adopted 8/10/37; amended 5/13/41

Approval of bacteriological and serological laboratories

Adopted 9/12/39

Use of a common drinking cup
Adopted 3/22/16

Use and concerning the providing of a common towel
Adopted 12/16/15; amended 3/22/16

Approval of lodging houses
Adopted 7/6/05

Barbering and barber shops
Approved 12/6/49

Cross connections between public water supplies and fire and
industrial water supplies
Adopted 2/9/37; amended 5/12/42; 10/9/51

To prevent pollution or contamination of any or all of the lakes,
ponds, streams, tidal waters and flats within the Commonwealth or
of the tributaries of such tidal waters and flats
Adopted 8/14/45; amended 10/14/45

Supervision of plumbing
Adopted 6/11/35; amended 8/6/40; 1/10/50; 5/8/56

Minimum standards of fitness for dwellings
Adopted 12/6/49; amended 3/8/55

Operation of plants for the purification of shellfish
Adopted 6/5/28; amended 10/7/41

Enrichment of flour, white bread and rolls
Adopted 11/3/48

Establishing grades of milk
Adopted 5/8/35; amended 11/17/48; 6/12/56

Egg Nog
Adopted 6/12/56

Flavored milk
Adopted 6/12/56

Fortified non-fat milk, half and half, standardized milk
Adopted 7/10/56

Cottage cheese
Adopted 7/10/56

Mayonnaise, mayonnaise dressing, mayonnaise salad dressing, salad
dressing, french dressing
Adopted 7/10/56

Fruit butter, fruit jelly, preserves and jams
Adopted 7/10/56

Sale of rabbits intended for food purposes

Adopted 5/14/29

Governing the business of cold storage, made under the provisions of General Laws, Chapter 94, Section 67

Adopted 10/10/33

Sterilization of feathers, down and secondhand materials intended for use in the manufacture of articles of bedding and upholstered furniture

Adopted 11/12/35

Labelling of articles of bedding and upholstered furniture

Adopted 12/10/30; amended 11/12/35

Manufacture and bottling of carbonated non-alcoholic beverages, soda water, mineral and spring water

Adopted 11/12/35; amended 4/7/36

Uncarbonated fruit beverages

Adopted 5/8/56

Business of slaughtering and meat inspection

Adopted 7/9/31; amended 12/10/35; 9/14/43

Poultry slaughterhouses

Adopted 9/14/43; amended 8/6/46

Approval of contracts for the production and distribution of certified milk

Adopted 7/14/36; amended 10/14/36

Frozen desserts and ice cream mix

Adopted 9/11/34; amended 5/8/56; 6/9/59

Bakeries and bakery products

Adopted 2/14/33; amended 1/10/50

Definition of "pasteurized milk"

Adopted 7/8/41; amended 11/4/41; 6/15/50

Establishments for pasteurization of milk

Adopted 2/12/35; amended 6/15/50; 10/20/53; 6/12/56

Standards and definitions of purity and quality of food

Adopted 2/9/37; amended 5/8/56

Pork products intended to be eaten without cooking

Approved 2/12/24

Dietetic foods

Adopted 5/12/53

Cacao products

Adopted 8/13/57

Licensing of hospitals and sanatoria

Adopted 4/14/42; amended 2/9/43; 12/14/43; 3/14/50

Licensing of rest homes

Adopted 11/3/48; amended 12/3/57

Licensing of convalescent and boarding homes

Adopted 11/3/48; amended 12/3/57

Dispensary license

Adopted 1/12/19; amended 5/13/19; 5/10/38

Dental clinic license

Adopted 8/10/43

General Rules for Police Station Houses, Lock-ups, Houses of Detention, Jails, Houses of Correction, Prisons and Reformatories

Adopted 1910; amended 4/8/30; 6/15/48

To establish standards for tuberculosis hospitals and sanatoria

Adopted 6/14/27; amended 6/5/28; 8/12/32; 1/17/39; 5/10/38;
10/21/48

Obtaining state subsidy

Adopted 5/11/20; amended 6/5/28; 2/14/33; 3/13/34

Minimum requirements for tuberculosis dispensaries as defined by the Department of Public Health

Adopted 4/6/15; amended 7/11/16; 11/7/19; 7/14/25; 4/11/33

Active tuberculosis and methods of determining it in certifications made by boards of health and physicians

Adopted 12/11/56

Responsibility of superintendent or director of a tuberculosis hospital

Adopted 5/14/57

Minimum requirements for uniform dispensary record system

Adopted 7/14/25

Governing the hospitalization of patients with chronic rheumatism

Adopted 5/8/45

Reporting and control of venereal diseases

Adopted 12/18/17; amended 5/12/18; 6/11/18; 3/11/19; 11/12/23;
10/1/25; 10/8/29; 1/14/30; 1/14/36; 8/9/38; 4/11/44; 11/3/48

9
Treatment of persons suffering from venereal diseases who are
unable to pay for private medical care

Adopted 2/14/33; amended 8/10/37; 8/9/38; 9/12/39; 11/6/40;
4/13/48; 11/3/48

Issuance of premarital medical certificates

Adopted 4/11/50

Approved prophylactic remedy for use in the eyes of infants at
birth

Adopted 5/12/36

Physical examination of school children

Adopted 3/11/52; amended 8/25/53; 3/9/54; 2/14/56

Labeling of receptacles containing Benzol (Benzene), Carbon
Tetrachloride and other harmful substances (approved jointly
with Department of Labor and Industries)

Adopted 6/12/56

Regulations promulgated by Director of Marine Fisheries

Approved for sanitary requirements 4/13/42; 12/10/57

TE



Legislation

The following legislation of particular interest to public health was passed by the 1958 and 1959 Legislatures, and enacted into law:

Acts of 1958 - (July 1 - October 22, 1958)

Chapter

- 441 - An act relative to the approval of certain proposed corporations. These corporations refer to facilities which must be licensed by the Department of Public Health, such as hospitals, homes, etc. Under this law the Department of Corporations and Taxation will have before it the approval of the Department of Public Health before instituting its own investigation prior to issuance of a charter for a corporation which must be licensed by the Department of Public Health.
- 449 - An act relative to blood tests in order to control brucellosis of cattle imported into the Commonwealth. Under this statute the Director of Livestock Disease Control or his representative may make by random selection such blood tests for brucellosis of cattle over six months of age and unvaccinated or over thirty months of age whether or not officially vaccinated, as will effectively control brucellosis.
- 465 - An act relative to the burial of bodies brought into the Commonwealth. The purpose of this law is to assist funeral directors to expedite the burial of these bodies without first having to contact the proper individual in the community for a perial permit; in a small town it has often been difficult to locate the person having this responsibility.
- 469 - An act providing for the right of appeal from an order of a board of health which adjudges the operation of a farm to be a nuisance. By this legislation the operator of a farm is given ten days after receiving an abatement order in which to file a petition for review in district court, and, pending review by the court, the order is suspended.
- 502 - An act providing that the Commissioner of Rehabilitation shall be a member of the Advisory Council on Alcoholism.
- 519 - An act authorizing the Commissioner of Public Health to transfer certain land in the city of Westfield to the Division of Youth Service for the purpose of constructing a place of custody thereon.
- 584 - An act relative to membership of the Board of Registration of Professional Engineers and of Land Surveyors, and regulating the practice of professional engineering and of land surveying. Under this law all persons practicing engineering

9

(aeronautical, chemical, civil, electrical, heating, industrial, mechanical, sanitary, structural, etc.) and land surveying in the Commonwealth must be registered. Registration is not required for the practice of the various trades such as plumbing, heating, ventilation, air conditioning and refrigeration.

- 585 - An act providing that persons engaged in the practice of physical therapy be registered by the Board of Registration in Medicine.
- 600 - An act relative to the establishment of rates to be paid by the Commonwealth or its political subdivisions for nursing or convalescent home care. The Director of Hospital Costs and Finances is named as the person to determine at least annually per diem rates to be paid to nursing or convalescent homes, said rates to be "adequate and reasonable" and "include a fair return on invested capital". Provision is made for the licensee of a home dissatisfied with a rate to appeal to said director.
- 610 - An act prohibiting the sale of tobacco products which have been contaminated by fire, smoke or water.
- 612 - An act establishing within the Department of Public Health a Division of Food and Drugs and a Drugs Control Section.
- 613 - An act changing the name of the Tewksbury State Hospital and Infirmary to Tewksbury Hospital and transferring said hospital to the Department of Public Health. This transfer will become effective January 1, 1959. There will then be eight institutions under the jurisdiction of the Department of Public Health. The acquisition of this institution will help to strengthen the program for the care of persons with chronic diseases.
- 626 - An act providing that certain meetings of certain public boards and commissions shall be open to the public. This act applies to state, county, district, city and town boards and commissions. Provision is made for executive sessions under certain conditions.
- 661 - An act establishing the office of Federal-State Coordinator under the Commissioner of Administration.
- 662 - An act establishing a Commission on Employment of the Handicapped and designating the first full week of October as Employ the Handicapped Week. This legislation adds a "commission on employment of the handicapped" to the Massachusetts Rehabilitation Commission. The Commissioner of Public Health is named as a member of this Commission. One of the objectives of the legislation is to create state-wide interest in the program to promote employment of the handicapped and encourage the organization of committees at the local level to assist in this program.

- 9
- 673 - An act authorizing the transfer of certain funds appropriated for the Department of Public Welfare to the Department of Public Health for the maintenance of the Tewksbury Hospital, and the transfer of certain funds and permanent positions to said hospital. Chapter 613 transferred Tewksbury Hospital to the Department of Public Health. Chapter 673 assures the orderly transfer of funds necessary for the reassignment of clerical and professional personnel to the proper agency and account.

Resolves of 1958 (July 1 - October 22, 1958)

- 134 - Increasing the scope of the investigation and study by the Department of Public Health relative to radioactive materials. The transportation and handling of radioactive materials in intra and interstate commerce is included in the study.
- 138 - Resolve increasing the scope of the special commission established to investigate and study the systems of sewerage and sewage disposal in the North and South Metropolitan Sewer Districts and the city of Boston, and the Metropolitan Water supply.
- 143 - Resolve providing for a study by a special unpaid commission relative to the laws relating to convalescent or nursing homes, and to the standards and costs thereof.
- 145 - Resolve authorizing the Department of Public Health to make an investigation and study relative to a ward for the treatment of certain persons in the Lemuel Shattuck Hospital.
- 155 - Resolve continuing the investigation and study by the Department of Public Works relative to great ponds and certain other matters.

Acts of 1959 (January 1 - June 30, 1959)

Chapter

- 131 - An act relative to certain funds of patients now or formerly in institutions under the supervision and control of the Department of Public Health. This legislation gives superintendents of institutions legal authority to administer funds which may be deposited for any patient who is physically or legally incapable of managing his own affairs.
- 189 - An act relative to the approval or disapproval of preliminary plans by a planning board under the subdivision control law and relative to notice thereof.

- 200 - An act providing for the admissibility in evidence of records of dispensaries or clinics, and sanatoria.
- 210 - An act penalizing the use of certain narcotic preparations except in good faith as a medicine.
- 219 - An act requiring that retail sale of certain edible fish be made by weight.
- 248 - An act further regulating the sale of instruments adapted for the subcutaneous injection of narcotic drugs. This act provides means of identification of hypodermic syringes and needles, by requiring that a pharmacist filling a prescription for such instrument shall enclose it in a sanitary container with the proper identification and that the person to whom it is issued shall keep it in such container at all times.
- 283 - An act authorizing the consolidation of the Children's Hospital and the Children's Medical Center, Inc. under the name of the Children's Hospital Medical Center, and the consolidation of certain other charitable corporations with the Children's Hospital Medical Center.
- 344 - An act increasing the fees for the examination and registration of physicians.
- 396 - An act relative to the sale of agricultural, vegetable, flower and other kinds and mixtures of seeds.

Resolves of 1959 (January 1 - June 30, 1959)

Chapter

- 36 - Further continuing the investigation and study by the Department of Public Health relative to equine encephalitis.
- 42 - Continuing the investigation and study by the Department of Public Health relative to establishing a ward for the treatment of certain persons in the Lemuel Shattuck Hospital.
- 55 - Providing for an investigation and study by a special commission relative to the use of pesticides and the effects of aerial and ground spraying of insects and crops within the Commonwealth.
- 56 - Reviving and continuing the special commission established to make an investigation and study relative to the establishment of an atomic energy industrial research center.

- 9
- 61 - Providing for an investigation and study by the Commissioner of Agriculture and the Commissioner of Public Health relative to living and working conditions of certain migrant and temporary laborers.
 - 63 - Reviving and continuing the special commission established for an investigation and study relative to the systems of sewerage and sewage disposal in the North and South Metropolitan Sewerage Districts and the City of Boston, and the water systems in said Districts.
 - 73 - Authorizing the Department of Public Health to make an investigation and study of the matter of abating the stench nuisance in the south end of New Bedford at Cove Road.

As the 1959 Legislature was still in session on June 30, 1959 it is expected that additional laws concerning public health and conferring new responsibilities upon the Department, and additional resolves providing for special investigations will be enacted early in the 1960 fiscal year.

12

Recommendations for 1960 Legislation

Following is the legislation to be submitted to the next session of the General Court by the Department:

1. AN ACT AUTHORIZING THE DEPARTMENT OF PUBLIC HEALTH TO REGULATE ALL SOURCES OF IONIZING RADIATION. The proposed act would extend the authority of the Department of Public Health to control all sources of ionizing radiation. The existing section 5B authorizes and directs the Department of Public Health to "control the transportation, storage, packaging, sale, distribution, production and disposal of radioactive materials which may affect the public health...." The primary concern should be not with the material itself but with the ionizing radiation emitted therefrom, since, except where the material itself is toxic, it is the emitted radiation which produces damage. The present proposal extends coverage by the department to x-ray machines, fluoroscopes and all other radiation producing machines.

2. AN ACT FOR THE INDEMNIFICATION OF STATE OFFICERS, EMPLOYEES AND AGENTS IN CONNECTION WITH ACTIONS ARISING OUT OF THEIR USE OF OR ACTIONS CONCERNING HAZARDOUS MATERIALS AND SOURCES OF IONIZING RADIATION. The Commonwealth has an obligation to protect its officers, employees or agents so long as they are properly carrying out their assigned duties. This obligation is recognized by section 3B of chapter 12, authorizing the Attorney General to defend and settle claims against state employees operating state vehicles. The proposed section 3E of chapter 12 would provide a similar provision in the case of radiation damage; proper steps to have its provisions enacted into law are urged. It is apparent that the proposed act covers all hazardous materials; it is felt that if ionizing radiation warrants this treatment, so do all other materials or applications which might result in litigation involving state employees. In the interest of efficient legislation, the proposed bill was drafted so as to include all hazardous materials.

3. AN ACT RELATIVE TO CONTROL OF AIR POLLUTION IN THE CITY OF BOSTON AND VICINITY. The purpose of this bill is to replace the present Division of Smoke Inspection of the Department of Public Health with an agency which can efficiently and economically effect the proper control of all air contaminants throughout the metropolitan area. The statutory limitations of the present law permit control by the Division of Smoke Inspection only of black smoke from stacks, whereas the need is for a uniform means of control of all types of air pollution over the entire affected area. Further, the present statute, Chapter 651 of the Acts of 1910, does not provide for any representation by the communities of the smoke control district over the expenditure of funds which they provide, or over the degree of control exercised. The proposed act would remedy these defects. It would replace the Division of Smoke Inspection with a Metropolitan Air Pollution Control Commission in the Department of Public Health, and the Commission would be empowered to adopt and enforce suitable air pollution control regulations, with the Division of Sanitary Engineering providing all necessary services, including manpower, equipment, and laboratory services.

4. AN ACT TO PREVENT THE POLLUTION OF SOURCES OF PUBLIC WATER SUPPLY. Under present conditions, activities or structures presenting serious polluttional hazards may be instituted near a public water supply source and no corrective action can be taken by the Department until after the pollution has occurred. Passage of the bill would protect the health of all water consumers and would protect the health of the users of semi-public water supplies not authorized by legislation, since Section 159 of Chapter 111 states that the Department shall have oversight and care of all inland waters and underground waters used by any person in the Commonwealth.

5. AN ACT REGULATING CROSS CONNECTIONS BETWEEN PUBLIC WATER SUPPLIES AND OTHER WATER SUPPLIES. At the present time there are about 900 double check valve installations protecting cross connections between public water supplies and secondary water supplies used by industrial plants and similar establishments. The request for additional installations increases each year, making it difficult for the personnel of the Division of Sanitary Engineering to make proper inspection and testing of the installations. Establishing an annual permit fee would help defray the cost of the inspection which is designed to protect the health of the water consumers on systems where such installations are permitted.

6. AN ACT RELATIVE TO THE CHEMICAL CONTROL OF ALGAE, WEEDS AND OTHER AQUATIC NUISANCES. Many of the lakes, ponds and streams of the Commonwealth are becoming choked with heavy growths of aquatic weeds resulting in hazards to swimming, boating, fishing and other recreational interests. The Departments of Public Health, Public Works and Natural Resources have been engaged jointly in research to control such aquatic growths by means of chemicals. Effective chemicals are generally toxic to man, fish and other animals at varying concentrations. The Special Commission consisting of the three departments indicated above is currently studying this matter and is of the opinion that it is essential to establish within some existing state agency the authority to license and permit the proper use of such chemicals in the waters of the Commonwealth. The Special Commission feels that if the nuisance and hazardous conditions which arise from the growth of aquatic vegetation are not controlled or eliminated, they may result in the curtailment of all recreational uses of a lake, may create disagreeable odors and appearance, may lower property values, and may jeopardize fish populations. The proposed legislation would authorize the Department to license operators to apply chemical to inland waters to control aquatic vegetation.

7. AN ACT PROVIDING THAT EVIDENCE PROPERLY ATTESTED TO THAT CERTAIN PROVISIONS HAVE BEEN COMPLIED WITH SHALL BE PRIMA FACIE EVIDENCE THAT AN EFFECTIVE DETERMINATION HAS BEEN MADE. The purpose of this legislation is to facilitate the presentation of evidence in cases of prosecution of persons for violation of the shellfish laws. At the present time, the Division of Law Enforcement, Department of

9

Natural Resources, must present evidence in court showing each and every step taken by the Department of Public Health in the determination of the contaminated nature of the shellfish areas, the method of publication and notification and the posting of the area. Thus the burden of proof that the area was legally closed to the taking of shellfish rests upon the prosecution. This is a lengthy procedure and frequently requires the attendance in court of representatives of the Department of Public Health for the sole purpose of presenting papers having to do with the mechanics of closing rather than in regard to the actual digging in the contaminated areas.

8. AN ACT FURTHER REGULATING LICENSING OF CAMPS, MOTELS AND TRAILER COACH PARKS. The purpose of this act is to require a person who proposes to construct a recreational camp or motel to obtain a license which is conditional upon construction in accordance with plans approved by this Department. Such conditional license and Departmental approval of plans now is required of those who propose to construct a trailer coach park.

At the present time, the Department approves plans showing the structures, fixtures and facilities to be provided for trailer coach parks prior to construction. This is not the case where a recreational camp or motel is to be built. The Department frequently is called upon to approve inadequate facilities after construction is completed, with additional expense to the licensee to comply with the requirements of the Department. The proposed law will require department approval of the plans prior to construction and permit the licensee to make such changes as may be required prior to construction.

9. AN ACT REGULATING THE DISTRIBUTION AND SALE OF PACKAGES OF HAZARDOUS SUBSTANCES INTENDED OR SUITABLE FOR HOUSEHOLD USE. Each year, hundreds of children and adults die in an extremely painful manner from the accidental ingestion of household chemicals. Proper labeling of these chemicals is recognized throughout the United States as an immediate requisite, so that adequate warning can be easily recognized by the consumer. Statements for first aid and special immediate action following the ingestion of these compounds also will save many lives.

The American Medical Association, food and drug officials and the chemical industry have agreed to certain principles which will constitute the basis of Federal legislation. State legislation is necessary, in order to protect the citizens of Massachusetts in regard to products which may be hazardous and manufactured within the Commonwealth, until such time as the Federal legislation may be passed.

One of the most important features of the bill is that it establishes a scientific method of determining what items should be labeled as poisons, irritants, sensitizers, etc. This legislation is essential for the protection of the public health.

10. AN ACT TO RELIEVE THE SHORTAGE OF MEDICAL, DENTAL, VETERINARY AND ENGINEERING SERVICES IN CERTAIN DEPARTMENTS, INSTITUTIONS AND COMMISSIONS OF THE COMMONWEALTH. The purpose of this act is two-fold:

(1) To enable the specified agencies of the Commonwealth to attract qualified personnel in the various disciplines listed by paying higher salaries to those who are diplomates in the field in which they are to be employed.

(2) To pay qualified personnel in these disciplines who are diplomates a higher salary than non-diplomates filling the same job position, thereby retaining the services of the more highly qualified personnel who might otherwise be attracted by higher salaries paid by other states, the Federal Government or private agencies.

11. AN ACT AUTHORIZING MANICIPALITIES TO APPROPRIATE MONEY FOR HEARING AIDS FOR NEEDY SCHOOL CHILDREN. This bill would provide hearing aids for more hard of hearing or deaf children by permitting the purchase of hearing aids by local communities. Present budgetary limitations of the Division of Maternal and Child Health necessitate refusal of some requests for hearing aids for children who should be eligible for such service. The purpose of this proposed legislation be to alleviate the financial burden on parents of acquiring hearing aids for their children.

12. AN ACT CHANGING THE BIRTH WEIGHT REQUIREMENTS IN CONNECTION WITH THE PAYMENT OF HOSPITAL CARE FOR PREMATURE INFANTS. The purpose of this bill is to reduce the birth weight eligibility of premature infants from five pounds to a maximum of four and one-half pounds. This change will reduce the number of cases eligible for financial assistance.

Of 114,141 live births reported last year from 117 hospitals having a maternity service, 7,657 or 6.7 per cent were premature births. 38 per cent of the prematures weighed four and one-half pounds or less at birth and 84 per cent of deaths among prematures occurred in this weight group.

Experience has demonstrated that prematures weighing four and one-half pounds or less at birth need special facilities and trained personnel to insure survival. Financial assistance provided by local boards of health and the State would be spent more advantageously in providing specialized care only for infants weighing four and one-half pounds or less at birth. Since infants whose birth weight is over four and one-half pounds usually have a shorter stay in the hospital, parents are better able to meet the expense of these larger prematures.



FISCAL SECTION

BUDGET 1958 - 1959
DEPARTMENT - MAINTENANCE

<u>Fiscal</u> <u>Year</u>	<u>Total</u> <u>Budget</u>	<u>Per</u> <u>Capita</u>	<u>Total</u> <u>State</u>	<u>Per</u> <u>Capita</u>	<u>Total</u> <u>Federal</u>	<u>Per</u> <u>Capita</u>
1959	\$5,942,744.10	\$1.19	\$4,294,339.56	\$.86	\$1,648,404.54	\$.33

INSTITUTIONS - MAINTENANCE

<u>Fiscal Year</u>	<u>State Funds</u>	<u>Per Capita</u>
1959	\$14,555,813.00	\$2.93

GRAND TOTAL - DEPARTMENT AND INSTITUTIONS

<u>Fiscal</u> <u>Year</u>	<u>Total</u> <u>Budget</u>	<u>Per</u> <u>Capita</u>	<u>Total</u> <u>State</u>	<u>Per</u> <u>Capita</u>	<u>Total</u> <u>Federal</u>	<u>Per</u> <u>Capita</u>
1959	\$20,498,557.10	\$4.12	\$18,850,152.56	\$3.79	\$1,648,404.54	\$.33

DEPARTMENT EXPENDITURES 1958 - 1959

	<u>TOTAL</u>	<u>STATE</u>	<u>FEDERAL & PRIVATE</u>
Commissioner's Salary	\$ 13,999.96	\$ 13,999.96	-----
Administration	393,345.05	197,672.33	195,672.72
Environmental Sanitation	767,869.22	680,670.11	87,199.11
Special Projects	29,738.83	29,738.83	-----
Water Pollution	176,375.95	92,990.45	83,385.50
Preventive Disease Control	1,268,389.69	1,162,620.34	105,769.35
Polio Vaccine Program	224,979.70	224,979.70	
Polio Research Program	7,783.63		7,783.63
Influenza Diagnosis	3,823.90		3,823.90
Geriatric Program	64,228.16		64,228.16
Planning and Research	524,565.13	-----	524,565.13
Health Services	1,016,825.18	606,251.57	410,573.61
Hospital Facilities	149,879.66	133,688.92	16,190.74
Tuberculosis Control	242,454.34	175,762.89	66,691.45
Reimbursement to Cities and Towns for T.B. Patients	304,569.55	304,569.55	-----
Institute of Laboratories	705,657.95	686,942.64	18,715.31
State Employees Group Insurance	7,995.08		7,995.08
Capital Outlay	34,388.97	34,388.97	-----
Grants-In-Aid	19,987.69	-----	19,987.69
TOTALS	\$ 5,956,857.64	\$4,344,276.26	\$1,612,581.38

Division of Training and Research

The major activities of this Division have been the coordinating of training activities, the determination of and satisfying of expressed needs of local health departments for training, participating in evaluation, planning training activities for local health agencies, and the development of standard reporting of training activities by divisions.

The medical social training project has been continued. This is a collaborative endeavor of the Department and the schools of social work with financing from Children's Bureau categorical grant funds. Although the number of student trainees is small, the work of the personnel employed in the project is having considerable impact on field training in social work. Utilization of Department personnel in the schools has resulted in a close liaison between them and the Department.

Early in the spring of 1959, an advisory committee to the division was appointed, consisting of the Dean of the School of Nursing, University of Massachusetts; the Director of Health Services, United Community Services; the Director of the Brookline Health Department; the Executive Health Officer of Hingham; and a representative of the Harvard School of Public Health. This group has been of great value in the development of liaison with agencies concerned with training in public health, both official and voluntary, in creating awareness of needs as seen by professionals outside the Department, and by bringing together some very able public health personnel with no official connection with the Massachusetts Department of Public Health, resulting in a fertilization of ideas for program development.

The creation of a position of supervisor of training whose primary function will be consultant to local boards of health on administrative matters has further strengthened the relationship of the Department with local health agencies.

There has been a steady growth in cooperative relationships with official and voluntary health agencies throughout the State. There has been collaboration with and participation on a Joint Liaison Committee consisting of representatives of the Metropolitan Boston Health Officer's Association, the United Community Services of Metropolitan Boston, and the Massachusetts Department of Public Health. This has increased the demand by agents of local boards of health for training.

A pilot project was completed with a short course in Local Public Health Administration offered to members of the Metropolitan Boston Health Officer's Association. Since completion, requests have been received from that organization to develop specific training courses in subjects such as public health law, records management, etc.

In response to a request from a group of public health agents, sanitarians and board of health members in western Massachusetts, another public health administration course will be offered in that area in the fall of 1959, and plans are being made for other courses in public health in various areas of the state during the coming year.

Training courses originate both in the various divisions of the Department and in schools or public health agencies. Some training programs are joint efforts of the various divisions, usually planned cooperatively with interested groups or agencies. The Division of Training has encouraged the concept of joint planning and participation.

Full-time academic training through the Department's resources was provided for a total of 11 persons employed outside the Department. In addition, 25 state employees received part-time academic training. These included physicians, nurses, social workers, technicians, etc. All funds utilized in this training were federal categorical or general grants.

A large number of specialized short courses, workshops, etc., in addition to those mentioned above were conducted on a variety of technical subjects. Lectures were given to a very large number of professional workers in public health and related fields. Practically every student nurse in Massachusetts, many teachers, clergymen, etc. received some instruction on phases of public health from Department staff members. The total number receiving this type of training was 6,173.

Field training was provided for a total of 131 persons. This included physicians, nurses, social workers, sanitarians, nutritionists, and physiotherapists.

Division of Health Information

Fiscal 1959 might be called the "New Look Year" for the Division of Health Information. It re-examined its objectives, strengthened its services, extended its activities, and gauged its needs for the coming years. In all this, health education was the basic stimulus, being regarded as "the sum total of the methods used to help people acquire the knowledge and attitudes which will lead them to take effective individual and community action." Materials production, public relations, editorial work, and the rest of the Division's manifold activities were seen as avenues to this goal of effective health education.

In keeping with the Department's policy of developing a better picture of its functions and activities in the public mind, the Public Relations Section strengthened liaison with newspaper, radio and television channels. Closer contacts with the Commissioner's office were developed, a monthly feature service for out-of-town weeklies and dailies was inaugurated, and the Division assumed responsibility for furnishing departmental bulletins, announcements,

and news items to the New England Journal of Medicine. The flow of news to the papers and to district offices and local boards of health was expedited. Closer liaison with the Governor's Office was developed in arranging joint releases, photographs, and radio and television specials.

The Editorial Section, in cooperation with the Division of Training, conducted a course in effective writing which was attended by about 30 members of the Department. A new edition of the Handbook for Physicians was compiled and sent to the printer, and should be available early in the next fiscal year. Consultation and editorial assistance were given to six divisions and the Diagnostic Laboratory.

"Commonhealth" continued to be published bi-monthly, featuring the following issues:

July-August, 1958	Summertime Health and Safety
September-October, 1958	Massachusetts in Pakistan
November-December, 1958	Biological Laboratory
January-February, 1959	Retarded Children
March-April, 1959	Rehabilitation Commission
May-June, 1959	Aging

"This Week in Public Health", in addition to routine announcements and coverage, featured such items as Mandatory Registration of Physical Therapists, Alcoholism Programs, State Committee on Children and Youth, Research in Nursing Homes, Massachusetts Health Research Institute, Dental Radiation and Safety, Tuberculosis Control in Mental Hospitals, Institute on Public Health Administration, and Lung Cancer and Smoking.

The audio-visual services are becoming a major activity of this Division. During the year, to help Department personnel keep abreast of the latest in motion picture health films a new previewing policy was established. As new films become available, personnel in the pertinent Divisions were advised, desired films were requested and critically evaluated on specially prepared evaluation forms, thus insuring a systematic approach to the purchase of films whenever possible.

A highlight of the accident prevention program was the purchase of six copies of the film "Rescue Breathing", four of which were assigned to the district health offices. These films, which deal with mouth-to-mouth resuscitation, have had many showings throughout the State to official and voluntary agencies.

With the deaths of a number of children throughout the country due to plastic bags, widespread publicity has been given to this danger. The Division of Health Information cooperated in this campaign with a publicity and educational program.

Major improvements started during the year were reorganization of the Department library, expansion of the audiovisual services, evaluation of all Department films, and development of a new film catalogue. A photographer-artist was added to the production unit and the job order system was replaced with a new and more efficient one.



The health educators had a busy and useful year; two of them completed academic training and on their return to the Division were assigned to the Northeastern and Southeastern districts. In addition, two health educators in the central office carried on program planning, community organization and assistance to division directors and others on techniques, projects, materials, etc. Consultation on accident prevention, exploration of the school health education area, and a promotional program in health careers were outstanding activities. A health educator was assigned to work with the Federation of South End Settlements in its Community Organization Department. Later she assisted the Division of Training in compiling information on trainees and current research projects.

BUREAU OF HEALTH SERVICES

Division of Local Health Services

District Health Officers met with the Director of this Division six times during the year, affording an opportunity for program review and program planning. In addition, at each conference representatives of other Divisions of the Department discussed current programs in their fields.

Visits were made regularly by the Director to the District Offices to review with the staff the goals and objectives and specific health problems of each area.

The association of local boards of health have been active throughout the year. Three new associations were organized; the Worcester County Association of Boards of Health, the Franklin County Association of Boards of Health, and the Hampshire County Association of Boards of Health.

Considerable interest in accident prevention programs was evidenced. The Health Commissioner of the city of Worcester has accumulated some excellent data on accidents and how they can be studied epidemiologically. The Southeastern Association of Boards of Health is planning an accident prevention program in the communities represented in that Association including an educational program aimed toward preventing the accidental poisoning of children. A statistical study of the number of accident cases which have attended out-patient departments in hospitals in the Nashoba area is being considered. Representatives of the Public Health Service's Division of Accident Prevention visited the Department and offered to tabulate the data collected during our three year accident prevention program.

For the first time the annual New England Conference on Rural Health was held in Massachusetts, at Amherst; for several years this had been held at the University of New Hampshire.

Public Health Nursing Section

There is growing evidence throughout the State that the Department's Public Health Nursing Advisors are being requested to provide closer supervision to local public health nurses and their employing agencies. This is due in part to a growing awareness of the importance and merit of this professional assistance, and in part to the dearth of budgetary positions on the local level. If the programs of the Department are to be satisfactorily carried out locally, this public health nursing supervisory service must continue to be provided to both suburban and rural areas.

Considerable attention was devoted to ways and means of getting public health nurses now employed better prepared for their duties. Conferences have been held with the State and local tuberculosis

leagues and with two university schools of nursing to plan an extension program which would enrich and broaden the background of nurses already employed in public health and would stimulate the nurse's appreciation of the value of additional preparation and insight into how it may be obtained.

In-service education programs held in the various Health Districts covered such subjects as tuberculosis and alcoholism, handicapping conditions of children, rehabilitation nursing, nursing records, basic principles of mental health for family service, school health service, etc.

The problem of increased case loads for medical care of children with handicapping conditions, that is orthopedic, chronic illness, plastic, and rheumatic fever has resulted in many more clinic sessions and consequently more demands on the time of the Public Health Nursing Advisors in the field.

Nutrition Section

The nutritionists have concentrated on two major activities: a variety of training programs for professional leaders and inter-professional group planning and committee work.

The role of nutrition in rehabilitation will be emphasized in the coming year and will include therapeutic angles of meals for the ill, aged and the so-called healthy persons who have inadequate or lop-sided food intakes for one reason or another. Joint conferences with other agencies on both the community and the institutional levels are planned. Several hundred proprietors of nursing and rest homes were advised on food and diet problems.

Social Work Section

Emphasis in the social work program has continued in providing direct social service in departmental medical care programs and in providing consultation service to social workers and others in community agencies relative to individuals and groups with health problems affecting their social functioning. The objective of developing a more generalized program is still a wish of this Section but the only hope for its realization seems to be in a reassessment of social work functions in certain existing programs.

Proportionately, the largest amount of social work activity still is in the field of maternal and child health. This includes service in specific departmental programs as well as referrals for social service consultation from community health and welfare agencies.

The crippled children's program accounts for the largest percentage of services given by district social workers. Activities in this program are patient-centered and include interpretation to and collaboration with social workers in hospitals, clinics and welfare agencies relative to service, eligibility, procedures, etc.

Many of the problems in the premature program relate to the handling of cases at the local level. Whenever practicable, it seems more advisable to work through the local board of health or hospital social service department than to have cases requesting financial assistance interviewed directly by a department social worker.

Requests for advice and assistance in planning for individuals with chronic diseases increase each year. This year there have been fewer referrals of individuals with tuberculosis and cancer, but an increase in cases of cardiovascular and neurological problems. Many of these referrals involve young adults who are severely disabled and who have limited rehabilitation potential.

The increase in the number of Department institutions has inevitably been felt in the Social Work Section. Several meetings have been held with hospital social workers to develop an eligibility guide to be used by hospitals in determining the amount of patient payment for those individuals whose bills are not being met by welfare agencies.

Educational activities have been carried out chiefly through the Medical Social Training Project and have included participation in classroom teaching activities, field training and field observation for social work students and in-service training activities.

Civil Defense

During the year fifteen Federal Civil Defense Emergency Hospitals were received and stored as follows: Area 1, Groton; Area 2, Dighton, Wareham, Middleborough, Norwell, Plymouth, Norwood and Stoughton; Area 3, Dudley, West Brookfield, North Brookfield and Sturbridge; Area 4, Blandford and Buckland. The addition of these hospitals to those previously stored brings the total to 56, one of which is a hospital used for training purposes. They will provide 11,200 beds in case of disaster.

During the past year about 1,800 people were trained in one or more of the various courses offered by the Medical Service. This number is small when related to the total needs of the Commonwealth should a disaster of major proportions strike.

Division of Maternal and Child Health Services

Maternal Care. In an effort to improve standards of care, representatives of this Division visited about a dozen hospitals throughout the State to advise on techniques of care in maternity units.

Through the combined efforts of hospitals, practicing physicians and local resources, the maternal death rate per 10,000 live births has been reduced from 2.8 in 1955 to 0.9 in 1957.

There was a substantial increase in the number of parents' classes conducted throughout the State. Education to stimulate early and continuing medical supervision of pregnant women is an important part of the Division's program. The prenatal and post-natal letter service which has been in effect for more than thirty years was evaluated this year. Almost 100 per cent of the recipients of the letters expressed appreciation for the information, guidance and encouragement expressed in the letters and requested that they be continued.

Several important studies are under way, including the maternal mortality study in cooperation with the Committee on Maternal Welfare of the Massachusetts Medical Society now in its fifth year; the study on diabetic pregnant women which has completed its fifth year; and a perinatal study in five large hospitals in Massachusetts which was started late in 1958.

Infant Care. The major emphasis in the infant care program is for infants prematurely born. Local boards of health spent approximately \$213,700 for the care of 883 premature infants born in 1958 in addition to the \$28,900 spent by the Department for the care of 101 premature infants born in 1958.

Congenital defects and birth injuries must be reported to the clerk of the town where the baby was delivered, and the clerk in turn must forward this information to the State Health Department. During the year ending June 30, 1959, 521 infants were reported to our census of handicapped children.

Preschool and School Care. One physician on the staff of this Division has devoted most of her time to a study of the growth and development of children placed in day care centers; she has spent much time in consultation with the boards of health who are responsible for the licensing and with the workers at the centers to stimulate them to attend refresher courses in preparation for improved care of these children.

Technical assistance was given to vision and hearing testers and refresher courses were given for those previously trained.

There has been considerable improvement in preschool and school health problems but there is still considerable need to improve existing services.

Services for Children with Crippling Conditions. This program provided diagnostic and treatment services for children under twenty-one years of age with certain crippling conditions. A registry was maintained to facilitate early case finding since delay in initiating remedial procedures could make the difference between successful and unsuccessful habilitation.

4,781 children received care under this program. There were 1,444 new cases admitted to services, as follows: 789 orthopedic, 64 plastic, 155 rheumatic fever, 87 congenital heart, 77 seizure, and 143 chronic disease, including cystic fibrosis.

Orthopedic clinics were held in hospitals in Brockton, Fall River, Gardner, Greenfield, Haverhill, Hyannis, Lowell, Lynn, Pittsfield, Salem, Springfield and Worcester. A total of 2,845 children made 5,316 visits to these clinics. Most of the children seen at orthopedic clinics are in need of physical therapy; the orthopedic consultant prescribes the treatment to be followed and arrangements are made by the physical therapists to carry out the recommendations in a treatment center or in the home.

The children's cardiac program consisted of two rheumatic fever clinics; hospitalization, convalescent and foster home care were provided for acute rheumatic fever cases and cardiac surgery. Rheumatic fever clinics were held weekly at North Reading State Sanatorium and at Burbank Hospital in Fitchburg. At 91 clinic sessions 456 children made 661 visits.

Three years ago a program for children with epilepsy was initiated. With new methods of diagnosis and treatment, approximately 80 per cent of children with seizure can be benefited, and successful control may prevent a lifetime of dependency and institutional care. During the year 231 children received care under this program.

Children with cerebral palsy who were found after careful screening to be able to benefit from training were admitted to Lakeville State Sanatorium or Massachusetts Hospital School, Canton.

Recent medical progress in diagnosis and treatment of handicapping conditions makes imperative an extension of this program in order that services may be provided for all children who would profit from care.

BUREAU OF PREVENTIVE DISEASE CONTROL

Division of Cancer and Chronic Disease

The Division of Cancer and Chronic Disease celebrated a third of a century of the Massachusetts Cancer Program at Pondville Hospital on May 27, 1959; approximately 150 persons attended. At the early afternoon session, Miss Neil Fountain discussed social service at Pondville, Miss Janet Weims outlined social service activities in cancer control, Dr. Charles Lund reviewed cancer control from the standpoint of the Massachusetts Medical Society, and Dr. Lombard outlined the Department's Cancer Program.

The late afternoon session program consisted of clinical cases and a panel on "Terminal Care of the Cancer Patient". Following dinner, Dr. Shields Warren reviewed the cancer situation since the inception of the Program; Dr. Alfred Frechette discussed how the new Massachusetts Health Research Institute might improve service to cancer patients and facilitate research concerning etiology of the disease; and Dr. Lombard prophesied that greater accomplishments undoubtedly would be made in the next ten years in cancer control than had been made in the past.

In the field of cancer and many of the chronic diseases, the etiology is as yet unknown; but it is known that there are more effective measures of control available than have been utilized. To meet these problems this Division is engaged in epidemiological research and professional education, as well as providing tumor diagnosis and clinical services. During the year, four articles were published and data collected and tabulated for other research projects. In 1958 Tumor Diagnosis Service examined 14,244 specimens which were received from 1,279 physicians and 105 hospitals and clinics. All of these were surgical specimens with the exception of 48 smears, and 12.5 per cent of the specimens were malignant,

There were 41,014 visits to the cancer clinics; 2,504 of these were made by individuals with new cancer diagnoses.

The cancer registry has now been in operation for two and a third years since the affiliation with the End Result Committee of the Public Health Service. The second deck of punch cards was completed this year and will be submitted to Washington. The first deck numbered 6,344, the second, 14,890. It will require from two to three years more to complete the back load of death records; after that the task of keeping the current data up to date will be a great deal less.

The Heart Program furnishes partial support to eight cardiac clinics; the State purchases services from the clinics, enabling them to employ medical social workers. At some of the cardiac clinics special demonstration projects are carried out: at Boston Lying-In Hospital study is being made of pregnant cardiacs, and at Boston Dispensary a study concerning the maximum rehabilitation for cardiac patients is under way. During the year there were 7,377

visits to the cardiac clinics; 844 of them were made by individuals with new heart diagnoses.

Diabetes control activities consisted of two statistical studies, participation in the Diabetic Fair, instruction concerning dietary needs for State institutions, local hospitals and other agencies, and lectures to visiting nurse groups.

The Geriatric Program was concerned primarily with collection of data to determine the needs of senior citizens and lectures to organizations of senior citizens on all aspects of problems of the aged such as medical care, mental health, housing, nutrition, insurance, etc.

A program is proposed in cooperation with the Division of Hospital Facilities in which nursing home administrators will be offered a so-called geriatrics nursing home clinic or geriatric center. This service team would consist of a public health nurse, an occupational therapist, a physiotherapist and a social worker and could be financed in a manner similar to the cancer and heart clinics. It is proposed that five such centers be established during the first year.

Division of Communicable Diseases

In advance of a wave of Type B Influenza which swept the State during March and April, 1959, the Division had publicized the recommendation that selected groups should be immunized with a polyvalent influenza vaccine. These priority groups were the elderly, persons with chronic illness, and persons engaged in providing essential services, such as firemen and policemen. It is known that thousands of elderly and chronically ill individuals were immunized with the polyvalent vaccine by private physicians and that numerous communities had programs for immunizing special groups to prevent absenteeism, so there was little evidence of increased mortality from this influenza.

The Salk polio vaccine, which was provided free of charge to physicians by the Department, during the past year was limited to use in infants under the age of one year and in pregnant women. For all other persons the vaccine had to be procured from commercial sources. Despite these well-publicized limits, the supplies of state-provided vaccine which had been ordered on the basis of the estimated number of births and pregnancies in Massachusetts were exhausted at mid-year, and it was necessary to obtain an additional supply. It became necessary to curtail or ration the distribution of the free State-provided vaccine in those communities which had used amounts exceeding their estimated needs. During the latter part of 1958 and the first quarter of 1959, polio immunizations were given primarily in doctors' offices with few public or mass inoculation programs being called to our attention.

It was hoped that the practicing physicians of Massachusetts might go along with the idea of low-cost polio vaccination programs in communities throughout Massachusetts. Accordingly on April 28, 1959 a letter was sent to all boards of health which suggested that they contact the members of the medical profession in their communities for the purpose of learning their plans or intentions regarding mass inoculation programs. The letter also suggested appropriate ways in which local boards of health could assist the physicians in their program, which, it was hoped, might develop into a "clean-up campaign" reaching many or most of the uninoculated.

More than 40 communities responded by setting up programs which in general were very successful. -- between 5 and 20 per cent of the total population in these various communities were inoculated. During the interval of April to July 1959 more than 790,000 doses of Salk vaccine were brought into the state and presumably used in either the mass inoculation programs, the state-sponsored program, or by general practitioners of the Commonwealth.

The Division requested and obtained statistical consultation from the Communicable Disease Center of the United States Public Health Service for the purpose of making a survey in the City of Boston of polio immunization status of the population by socio-economic status, by age, by race, and by whether or not a family physician was claimed. This study showed that there was a definite correlation of vaccination with socio-economic status. The lowest socio-economic bracket claiming not to have a family physician contained the greatest percentage of uninoculated or inadequately inoculated persons.

During the calendar year of 1958, 104,916 cases of communicable diseases were reported to this Department. The number of cases reported rose to this figure from 82,923 for 1957. Most of the increase was caused by chicken pox, german measles, measles and whooping cough. This rise might have been even more dramatic had it not been for the considerable decline in the reported occurrence of mumps and scarlet fever. Some of the rise, however, is more apparent than real in that an attempt was made during this year to secure better reporting to local boards of health and by local boards of health to this Department.

There were slight increases in bacillary dysentery, infectious encephalitis, infectious hepatitis, meningitis undetermined, ophthalmia neonatorum, salmonellosis and septic sore throat, which were somewhat compensated for by decreased numbers of cases of diphtheria, tetanus, tuberculosis and typhoid fever. There was a total of 29 cases of polio, of which 14 were paralytic. This compares favorably with the 25 cases which were reported in 1957.

Division of Venereal Diseases

The most important single event of the year was the continued increase in syphilis. Gonorrhea maintained a steady plateau increasing by 0.3 per cent over the previous year.

Our records clearly indicate that organized and commercialized prostitution is not a major factor in our venereal disease problem, since approximately 4.8 per cent of our patients with these diseases named prostitutes as their contacts. Our biggest source of venereal disease is the pickup. Most of our patients with gonorrhea are single, but most of our patients with syphilis are married. The average age of the civilian patients with gonorrhea is 27.0 whereas the average age of military patients is 23.1. While the pickup remains the biggest source of venereal disease, the places of pickup are centered primarily around the taverns, bars and restaurants. The home, hotels and automobiles in that descending order of frequency are the places of exposure.

The Division still continues the follow-up of all selectees discovered to have a positive blood test for syphilis or other evidence of venereal disease. These patients may be examined by their private physician or the nearest State cooperating venereal disease clinic. These reports are evaluated and sent to the Induction Board. Similarly, the Division receives reports from the military of men separated from the Armed Forces who need follow-up for these diseases.

Based on its successful experience for the past seven years, the Division staff is responsible for the interviewing of military patients in Massachusetts and their contacts. This work is in addition to our contact investigation activities of all contacts of military patients in Massachusetts.

In the State cooperating venereal disease clinics there were 4,902 patients examined, and these represented a total of 22,933 clinic visits.

Our plans for extending reciprocity arrangements insofar as the premarital examination law is concerned continues. At the present time out of the forty-three states which have such laws, Massachusetts will accept the certificates of thirty-eight. In return, twenty-three states have agreed to accept our premarital certificates when properly completed.

In addition to the preventive and control activities, the Division is currently engaged in the following applied research studies: Prenatal Syphilis Study Program, Serologic Study, Military Interviewing Program, Treponema Pallidum Immobilization Test Study, Reiter Protein Complement Fixation Test Study, Evaluation of Erythromycin as an Alternate Therapy in Penicillin-Sensitive Patients, Evaluation of the Sensitivity of Gonorrhea to Penicillin, Cardiovascular Syphilis Study, Evaluation of Nursing Experience, and Long-term Follow-up of Chronic Biologic False Positive Reactors.

Division of Dental Health

The objectives of this Division are the prevention and control of dental diseases and malformations through organized community efforts.

The experience of the communities of oldest fluoridation history has been followed closely during the past year. This experience is now of sufficient length and the findings from our observations of such a conclusive nature that there can be no doubt as to the significance of fluoridation when applied to the dental caries problem of the typical Massachusetts community. Our observations indicate that at least a 60 per cent reduction in permanent tooth caries prevalence may be expected. The effect of such a suppression on the over-all effectiveness of traditional school health services is perhaps not as yet fully appreciated. The effect on the expected dentist manpower problem occasioned by our rapidly expanding population and rather static supply of dentists to meet coming population needs has been only incidentally referred to to date. The effect on public and private dental health costs, which are now estimated as 15 per cent of the total health bill of either cost category, can be highly significant.

Only twenty-four Massachusetts communities are now using fluoridation. The procedure is frequently bitterly opposed when proposed for public approval. Based on the information now available from the experience of Massachusetts communities there can be no ground for objections on matters of strictly dental competence.

Topical fluoride therapy has been widely recommended recently by some public health and professional dental groups as a specific preventive for dental caries particularly in rural areas. Fifty Massachusetts communities report the use of this procedure in varying degrees in public programs. Field personnel of the Division of Dental Health during the past year have used the technique for demonstration purposes only. The procedure has proved to be too time-consuming and of too uncertain reward in the face of the magnitude of rural problems and the dearth of personnel to meet them. In view of the Division's experience and observations in local communities it is planned to make an evaluation of the specific preventive as a public health procedure in local health programs.

Through a study grant by the Children's Bureau to the crippled children's activities of the Department it has been possible to make a beginning at providing the complicated corrective resources for treatment of the badly facially deformed child. Studies have been undertaken of the potential size of this problem, involving deformities that could be classified as crippling in the public health sense. Utilizing a newly conceived index of malocclusion in a survey of 4,500 children in three communities, it has been possible to define a group in most need of correction of developmental defects that would not be larger than 100 individuals drawn from the currently enrolled school-age population in Massachusetts.

Data from the state-wide radiation control program which has been in operation during the past year indicates a steady reduction

of radiation dosage from dental sources. Approximately 700 dental x-ray units have been surveyed and have had corrections made to effect a greater margin of safety for patients, operators and the immediate environment.

Division of Alcoholism

On June 30, 1959 this Division completed its eighth year of operation with fifteen cooperating alcoholism clinics located in out-patient departments of general hospitals. Two of these clinics were established during the fiscal year, one at Cambridge City Hospital and one at Boston City Hospital which was about to open as the year closed. The other clinics are located as follows:

Boston	Peter Bent Brigham Hospital
	Massachusetts General Hospital
	New England Hospital
	Washingtonian Hospital
Brockton	Brockton Hospital
Fitchburg	Burbank Hospital
Lawrence	Lawrence General Hospital
Lowell	Lowell General Hospital
New Bedford	St. Luke's Hospital
Pittsfield	Pittsfield General Hospital
Quincy	Quincy Hospital
Springfield	Springfield Municipal Hospital
Worcester	St. Vincent Hospital

During the fiscal year 1,647 cases were admitted to the cooperating clinics; of these 1,376, or 93.5 per cent, were new cases; the others were previously discharged cases which were readmitted.

Of the 1,019 cases discharged or closed, 326 or 32.1 per cent were recovered or arrested cases of alcoholism; 102 or 10 per cent were closed as uncooperative and unresponsive; 34 or 3.3 per cent were not accepted for continued treatment after initial interview; 367, or 36 per cent were referred to other facilities, and 22 or 2.1 per cent died while under treatment. Over-all study of statistical reports of the clinics shows an improvement in the number of recovered cases.

BUREAU OF HOSPITAL FACILITIES

Division of Hospital Facilities - Licensing Section

The Commonwealth continues to show remarkable progress in its licensed hospital facilities. Of 189 licensed facilities, 62 renewals or new licenses were issued during the present fiscal year. Marked advances have been made in the improvement of physical facilities, expansion of ancillary services, strengthening of medical and nursing staffs and improvement of patient records. Particularly noteworthy is the fact that 90 per cent of the total hospitals eligible for accreditation by the Joint Commission of Hospital Accreditation have been accredited. This means conversely that only 10 per cent of those hospitals eligible for accreditation remain to be accredited. This is a remarkable record in view of the national average of 50 per cent accredited throughout the rest of the country.

The Division continues to be active in assisting hospitals in controlling the spread of staphylococcus infection. Of particular value was a conference on staphylococcus infection at the Lemuel Shattuck Hospital, which filled to capacity the large auditorium of that institution. The Division is cooperating with the Massachusetts Hospital Association in continuing program to control staphylococcus infection.

Substandard facilities continue either to close their doors or to achieve compliance with standards. A particularly difficult problem was resolved this year in the closure of one hospital. It is expected that another will either be closed or will be replaced by a new facility. The availability of qualified nursing personnel continues to present a very serious problem, particularly from the standpoint of the ratio of ancillary workers to professional personnel. The problem presents itself in hospitals as well as in nursing homes.

As of June 30, 1959 there were 621 nursing homes in Massachusetts with a total number of 16,579 beds. These figures indicate an increase of 21 homes and 1,089 beds during the present year. The number of licenses issued for the past fiscal year is 329, of which 92 are new and 237 are renewals. The major problems encountered in the licensure of nursing homes are as follows:

1. Resistance on the part of qualified professional nurses to seek employment in nursing homes because of lack of interest in geriatrics.
2. The licensure of practical nurses by waiver which has not improved the quality of nursing care. The Division, in cooperation with Boston College School of Nursing and the Massachusetts Federation of Nursing Homes, conducted a twelve weeks course one night a week for three months at Holy Ghost Hospital. Enrollment was restricted to 70 persons and limited to individuals employed in nursing homes who were licensed by waiver.

Standards in nursing homes continued to improve but many problems continued to arise, indicating the need for increased professional and clerical assistance.

As of June 30, 1959 in the State there were 550 rest homes with a total of 8,720 beds. During this fiscal year 44 new licenses were issued and there were 200 renewals.

During the year 8 licenses were renewed for city and town infirmaries as of June 30, 1959, and there were in the State 34 infirmaries with 2,092 beds. Three infirmaries closed voluntarily following a hearing under the State Administrative Procedure Act. The closure of another infirmary is still a highly controversial matter. However the city officials propose to close the facility. Of the 34 infirmaries, 12 have been licensed as public medical institutions.

Hospital Survey and Construction Section

During the fiscal year 1958 to 1959 a total of 12 hospitals have received Federal aid under Public Law 725. The total beds added as a result of these projects is 584. The amount of Federal funds allocated for these projects amounts to \$3,127,134. Under Public Law 482, 5 hospitals received Federal assistance amounting to \$250,000 for diagnostic and treatment centers. The single chronic disease hospital grant amounting to \$300,000 was awarded to the Jewish Memorial Hospital in Boston; as a result 104 additional beds will be added. The single rehabilitation project was that of the Holy Ghost Hospital of Cambridge which received a grant of \$53,933.

A notable achievement during this present fiscal year was the completion of the hospital utilization study comparing 1945 with 1955. It was apparent that as a result of this study, hospital utilization has increased from 109 to 124 hospital admissions. Other outstanding findings were the loss of population in the metropolitan Boston area and the marked increase in hospital utilization in the suburban areas. This is particularly noted with respect to maternity admissions.

At the conclusion of this fiscal year the Division lost the services of a hospital survey administrator as a result of exhaustion of Federal funds for this position. It is hoped that in the future the budget will allow a hospital survey administrator since the survey activities of this program are extremely important.

The bulk of our applications are now for second grants and only a relatively small number of hospitals have thus far not applied for Federal funds. An attempt is being made to encourage building programs in these hospitals. The demand for additional Federal funds is continuing without abatement. It would appear that for the next decade there will be a great demand for Federal assistance in adding new facilities and replacing old facilities.

BUREAU OF TUBERCULOSIS AND INSTITUTIONS

Division of Sanatoria and Tuberculosis

The fiscal year ending June 30, 1959 was a significant period in solving new and challenging problems in tuberculosis control. A milestone in tuberculosis control in Massachusetts was reached when the first recalcitrant tuberculous patient was committed to the Rutland State Sanatorium Treatment Center.

Other important events during the year were:

1. The opening of a section of Rutland State Sanatorium for the care of patients with chronic disease and the admission of the first patient on May 13, 1959.
2. The transfer of Tewksbury Hospital from the Department of Public Welfare to the Department of Public Health which complements the Department's hospital facilities by caring for patients not suitable for other institutions and those requiring custodial care.
3. The adoption of two types of written agreements to improve follow-up and eliminate difficulties in Mantoux tuberculin testing programs and delegate responsibilities to the official and voluntary agencies involved to insure a complete and successful program.
4. A study of the tuberculous alcoholic in a county sanatorium.

The case rate and death rate continued its gradual decline. There were 1,505 new cases of tuberculosis reported, or a case rate of 30.4 per 100,000 population. Of all pulmonary tuberculosis reported, 67.5 per cent was in the moderately and far advanced stages. Every effort is being made to find cases of tuberculosis in the minimal stage.

Through the mutual cooperation of the Massachusetts Commission on Alcoholism, the Massachusetts Tuberculosis and Health League, the Boston Sanatorium, and the Division of Sanatoria and Tuberculosis, the Commonwealth has established a leadership role in controlling the tuberculous alcoholic by the establishment of a case register and by planning the opening in the near future of a Half-Way House for tuberculous alcoholics at Boston Sanatorium.

Section 6 of Public Law 85-316, passed by the 85th Congress on September 11, 1957 permitted the admission to the United States under specified restrictions of certain aliens afflicted with tuberculosis. Under this law 136 applications have been received and 99 aliens have arrived in Massachusetts. The Division has maintained a central index to facilitate the proper supervision and follow-up of these aliens and their associates.

Approximately 211 aliens with pulmonary fibrosis have been admitted to Massachusetts to the present time; of these 161 are being followed closely by this Division by means of questionnaires sent to local boards of health routinely every six months.

Close supervision is being given those tuberculosis patients who are receiving Disability Assistance to determine if the individual is receiving adequate medical supervision and also whether minimum standards of treatment outside the hospital are being maintained.

In the tuberculosis case finding program 40,527 x-rays were taken during this year with concentration on penal institutions, mental hospitals, and positive tuberculin reactors and their contacts in high incidence communities. The follow-up of positive findings, excluding mental hospitals and Bridgewater State Farm, revealed 16 active cases of tuberculosis (3 previously known but not under care).

In July, 1958 the new mobile bus was officially put into operation. The 70 mm. photofluorographic x-ray unit is equipped with a mirror-optic camera which reduces radiation exposure to one-fourth that of the conventional unit.

During the fiscal year, 70,266 persons were Mantoux tested; of these, 2,752, or 3.9 per cent, were positive. These figures include adults and children.

In Pittsfield a tuberculosis consultation clinic was established in the Pittsfield General Hospital which will serve not only the residents of Pittsfield but also those of the surrounding towns. This is a pronounced departure from the established custom and may lead to further regionalization of health services.

During the year this Division has revised and distributed to local health departments the "Manual of Reporting Instructions for Tuberculosis", "Facts and Figures for 1956 and 1957", "What Do You Know About Tuberculosis" and "Home Care of Tuberculosis Patients".

Lakeville State Sanatorium

The daily average number of patients at this institution was 30 tuberculous, 4 poliomyelitis, 153 with crippling conditions and 6 aging persons. Although the number of tuberculosis patients and those with poliomyelitis continued to drop, patients afflicted with chronic, mostly orthopedic, diseases, more than made up the drop. Consequently the facilities of the Sanatorium were fully utilized and new admission procedures had to be instituted.

Upon the retirement of Dr. Harry A. Clark in November, 1958 Dr. George L. Parker transferred from Pondville Hospital and assumed the position of Superintendent of Lakeville State Sanatorium.

No major changes in treatment were carried out although numerous minor changes were made to increase the efficiency of the hospital. The most outstanding change was the reduction of the bed capacity to 210 in order to allow better access to patients and reduce fire hazards.

The biggest demand for beds was in the field of multiple sclerosis and other neuromuscular conditions. The majority of these patients require total nursing care, and our ratio of three patients to one medical personnel barely meets the minimum requirements. A considerable waiting list of these patients has been established.

During the year a volunteer service was established; these volunteers are helping to feed the more or less helpless patients, alleviate the loneliness of some of the elderly patients, and provide entertainment on a regular basis.

The suggestion has been made that the name of this institution be changed to Lakeville Hospital and that it be developed into a regional chronic hospital not only serving the orthopedic needs of the southeastern section of the State but also expanding into other fields, since both adults and children suffering from chronic diseases of all types and not pulmonary tuberculosis are hospitalized there.

North Reading State Sanatorium

The fiscal year opened with a patient census of 129 and closed with a census of 113. The daily average number for the twelve months was 129. The average age of tuberculosis patients admitted was 5.73 years.

In December, 1958, Dr. Claire W. Twinam, Superintendent of North Reading, transferred to Pondville Hospital, and Dr. Roland R. Cartier assumed the position of Superintendent.

There was no radical change in anti-tuberculous therapy; treatment with streptomycin, para-amino-salicylic acid and isoniazid instead of the newer drugs, continued.

Under authority of Chapter 258 of the Acts of 1959, providing for the admission of children with chronic disease, four cases of cystic fibrosis were admitted during the winter. As cases of tuberculosis become fewer, more chronic cases can be admitted, consistent with budget readjustments, since the treatment of a case of cystic fibrosis is more expensive than a case of tuberculosis because of the daily need of antibiotics, pancreatic enzymes, supplemental vitamins, and the continuous mistogen therapy during the hours of rest and sleep.

The Sanatorium school continued with an enrollment of 49 pupils. Graduation exercises, at which diplomas were awarded to five patients, were held in June. The occupational therapy program continued in the wards and the occupational therapy shop.

Rutland State Sanatorium

The patient turnover at this institution has been greater than last year; during the year 287 patients were admitted. The Tuberculosis Section had 180 patients at the beginning of the year and 169 on June 30. The highest number at any one time was 191 and the

lowest 153. The daily average patient population was 172. The average age of patients was 47.25.

The management of tuberculosis has not changed except, perhaps, that INH (isonicotinic hydrazid) is being substituted more and more for streptomycin, principally because it is more efficacious and easier to take.

The first patient was admitted to the new Chronic Disease Section on May 13, 1959. This was a woman with a cerebrovascular accident with partial paralysis. Nineteen patients have been admitted to this service, of whom two have died. Another ward is to be remodeled and prepared for more chronic disease patients; 15 applications are now on file. It is anticipated that the number of tuberculosis cases will continue to decrease slowly but that the number of chronically ill patients will increase at a greater rate.

Westfield State Sanatorium

Tuberculosis Service. During the year there were 176 admissions to this service and the average length of stay was 241 days. The average daily census was 96. This is about 69 per cent of capacity as compared with 85 per cent last year when the average daily census was 119. With the decreasing tuberculosis census, beds will be realigned so that other chronic diseases may be admitted. There were performed 34 major operative procedures, while pneumothorax or pneumoperitoneum was given 294 times.

On November 20, 1958 a one-day Institute on Tuberculosis and Alcoholism was held at the Sanatorium under the aegis of the State Commissioner on Alcoholism and the State Tuberculosis League. An outstanding and interesting program was arranged which drew an attendance of 107.

Cancer Section. During the year 717 patients were admitted to this service with an average length of stay of 19 days. The average daily census was 37, or 73 per cent of capacity. Last year the daily average census was 31, or 63 per cent of capacity.

For the twelfth consecutive year the Massachusetts Division of the American Cancer Society has carried the expense of a full-time statistician at Westfield whose work makes possible continuous evaluation of the contrasting types of cancer therapy carried on. Under another grant from the American Cancer Society, a study on early diagnosis in situ of cancer of the cervix uteri is being done by colpomicroscopy under the direction of the Chief Visiting Pathologist.

Two cancer teaching clinics for all physicians in western Massachusetts were held.

Pondville Hospital

In spite of the shortage of professional nurses during the year, ^{app}roximately 100 more patients were treated in this hospital

than during the previous year. The average period of hospitalization was reduced from 27.6 to 24.1 days. The daily average number of patients was 94.

When Dr. George L. Parker, Superintendent since 1934, left Pondville to become Superintendent of Lakeville State Sanatorium, Dr. Claire W. Twinam, Superintendent of North Reading State Sanatorium, was appointed as his successor at Pondville.

There were 100 general cancer clinics held, with an average attendance of 70. Other clinics held were gynecological, genito-urinary, x-ray, nose and throat, thoracic and medical; clinic visits totaled 16,108. The services provided by the out-patient department consists of the follow-up of known cancer patients or suspect cancer patients, provide definitive treatment in certain precancerous conditions which may be amenable to simple excision, provide consultation service for physicians, and provide public health education.

Lemuel Shattuck Hospital

This was a year of maximum activity for this hospital. The patient admissions totaled 1,591, with 363 in the first quarter, 393 in the second quarter, 403 in the third quarter, and 432 in the last quarter of the year. This represents a 35 per cent increase over the last fiscal year.

Two nursing units were opened, one equally divided between the Neurology Service and the Orthopedic Service, and the other for the care and study of metabolic diseases. This raised the number of beds to 350.

The Department of Physical Medicine and Rehabilitation rendered a total of 99,633 treatments, as compared to 80,921 the previous year. Continued growth of this Department will depend on a corresponding increase in staff, so that patients' treatment schedules may be accelerated and patient turnover increased.

In the Clinical Laboratories 141,027 tests were performed, an increase of 51,441, or 65 per cent.

The training and research activities continued to grow most satisfactorily: teaching of Harvard third-year students began; Tufts and Boston University expanded their fourth-year teaching programs; the Neurology Service was approved for residency training. A grant was received from the National Heart Institute to train doctors and biostatisticians in Clinical Pharmacology.

Massachusetts Hospital School

During the year 23 boys and 25 girls were admitted to the School. In the same period 37 boys and 25 girls were discharged. The highest number of patients at any time was 148 and the average daily census was 117.

7
Handicapped children of the Commonwealth between the ages of four and twenty who are mentally competent to attend school are eligible for admission for hospital care and education. At the present time it seems probable that the number of patients crippled by poliomyelitis may decrease and even though the school is filled to capacity at the present time it may be possible in the future to consider the admission of other types of cases who need rehabilitation, possibly cerebral palsy cases with good intelligence but severely handicapped.

The school program caters to the needs of students in preparing them for the liberal arts colleges, for advanced training in commercial fields, and for various types of vocational work. The number of student-patients taught was 161. In addition, bedside teaching is carried on at Bradford Infirmary with about 34 students. The eighth grade students continue to have the experiential course in home economics and industrial arts, spending two periods a day three days a week in this program. Next year a course in conversational French is planned for elementary school pupils; this class will meet four times a week and will be made up of several school grades.

Tewksbury Hospital

On January 1, 1959, the Tewksbury Hospital, under the provisions of Chapter 613 of the Acts of 1958, became the Department of Public Health's eighth institution. TE

During the fiscal year 3,604 patients were cared for: 2,702 males and 902 females. The largest daily census was 1,563 on February 28, 1959, the smallest 1,316 on June 30, 1959.

The Training School for Attendant Nurses graduated 33 on May 20, 1959.

The Physiotherapy Department includes electrotherapy, hydrotherapy, diathermy and all types of mechanical therapeutic devices. In an average day 46 patients are treated, which includes whirlpool, diathermy and electric therapy. During the year the treatments totaled 11,040.

Two Occupational Therapy shops are maintained where patients are taught rug weaving, rug hooking, hand loom weaving, wood working, wood carving, radio repairing, furniture refinishing needlework, etc.

The Dental Department, the Pathological Laboratory, the X-ray Department and the Library all report full-time activities.

The greatest need at Tewksbury is new hospital buildings; in the meantime new wiring, fire protection and painting are constantly being done to improve the old buildings.

BUREAU OF INSTITUTE OF LABORATORIES

Division of Biologic Laboratories

Progress toward a more purified tetanus toxoid with higher antigenicity was achieved during the year. Potency of the toxin has been increased at least threefold, with a fourfold increase in the potency of the purified product. This has been of sufficient interest in the field so that ten producing laboratories located in four states and five countries have either sent representatives to the laboratory to study our methods or have corresponded extensively regarding them. The demand for tetanus toxoid continued to increase, indicating that improvement in quality and increased reception by the public go hand in hand.

The distribution of typhoid vaccine continued at a low level, due apparently to the absence of floods, etc. Distribution of smallpox vaccine was second highest in the State's history. The distribution of silver nitrate ampoules for gonorrhealophthalmia was the highest on record.

The demand for pertussis vaccine remained at about the same level as in recent years. The distribution of the 20 cc. clinic size vial was discontinued. It is hoped that better methods can be found for accelerating production of this material because of the high demands for this component in DTP (diphtheria, tetanus and pertussis antigen).

Overall distribution of biologics for the year was the highest ever and was greatly aided by the automatic packaging machinery recently installed.

In the Blood Processing Laboratory, in the work on normal serum albumin 3,205.34 liters of State-owned plasma were fractionated. Dried material equivalent to 2,360,100 cc. vials was produced; 1,215 vials were distributed to hospitals. Although dried material equivalent to 34,900 2-cc. vials of immune serum globulin were produced, distribution supplies of this product were exhausted several times during the year. Interest has continued in fibrinogen-free low globulin plasma, both locally and nationally, but thus far the National Institutes of Health have not received the data they require for licensing.

Diagnostic Laboratory

There was an increase of 10 per cent in specimens received for diagnostic laboratory tests, particularly in nose and throat specimens for streptococcus culturing and in virology specimens, which are particularly time-consuming. With the increase in streptococcus culture work by private approved laboratories, the bacteriology section may participate more actively in important field investigations, in improving diagnostic laboratory procedures, and in developing fluorescent antibody techniques which will have far-reaching advances in diagnostic laboratory techniques.

9

The continuance of the Eastern equine encephalitis investigation is important in spite of the low level of activity of this virus this past year. By continuing studies on this problem in years between outbreaks the laboratory will be better prepared to cope with the next outbreak of the Disease. In connection with this study the Wassermann Laboratory examined 217 bats; all were found to be non-rabid.

This year 243 laboratories have been awarded certificates in the voluntary laboratory approval program. This is an increase of 7 over 1958 and of 143 over 1946, the beginning of the program.

The need for a physical consolidation of the Diagnostic and Biologic Laboratories is increasingly felt. At the close of the year legislation was pending which would permit the Commonwealth to purchase from Harvard University land in Jamaica Plain with the goal of constructing a modern diagnostic laboratory adjacent to the biologic laboratories.

Wassermann Laboratory

The Wassermann Laboratory performed 468,605 tests during the year. A total of 50,404 specimens were tested for premarital purposes and 38,793 for prenatal purposes. Out-of-state premarital certificates were issued to 1166 applicants.

This year 130 laboratories participated in the Evaluation of Serologic Tests for Syphilis; 60 of them were approved to perform standard tests and 62 were approved for rapid tests for blood donor purposes only.

The Wassermann Laboratory participated again this year in the National Evaluation of Serologic Tests conducted by the Public Health Service and performed qualitative and quantitative Hinton tests on 200 matched samples of serum. The results showed that both the sensitivity and specificity ratings of the Hinton test were satisfactory and compared very favorably with tests performed in other state laboratories.

Material submitted from all parts of the state for rabies diagnosis consisted of heads from domestic and wild animals. Altogether, 229 specimens were received and examination proved all to be non-rabid. At times the diagnosis of rabies is most difficult due to the presence of material in the brain which somewhat resembles Negri bodies, or when no Negri bodies can be found in the initial examination. Recent studies have shown that the fluorescent antibody technique has overcome these difficulties and is a rapid, accurate method of rabies diagnosis. Since the anti-rabies fluorescein conjugate is available commercially it is hoped that equipment for this test may be purchased as soon as possible.

The use of the Reiter Protein Complement Fixation Test as an adjunct to the routine testing procedures has been continued.

BUREAU OF ENVIRONMENTAL SANITATION

Division of Sanitary Engineering

During the year the work load of the Division has continued to increase in all four major activities; vis., water supply, stream pollution, air pollution, radiological health and community sanitation. No additional personnel have been provided to carry out these expanded activities. The critical personnel shortage must result in curtailed activities in some fields unless funds for additional staff and equipment are provided as requested in the 1961 budget.

Water Supply. Public water supply systems in Massachusetts serve about 98.5 per cent of the total population of the State. Cognizant of the 1957 drought, many communities are taking steps to develop additional sources of water supply. Fluoridation of public supplies has continued. A total of 24 communities now supply a population of about 249,000 with fluoridated water. The sampling program of all water supplies has been continued. A water treatment pilot plant to determine the practicability of coagulation and sedimentation without filtration for color removal has been successfully operated at several water supply installations throughout the State.

Water Pollution Control. Migration of population from urban to semi-rural areas has increased the number of requests for the examination and approval of plans for private sewage disposal plants and for the enlargement of public sewerage systems. Some streams receiving liquid industrial wastes have reached their natural waste assimilating capacity, requiring more and more attention of the Division in the examination of sewage and waste treatment plants, stream pollution surveys and consideration of plants for industrial waste treatment. Many of the latter deal with highly complex wastes not readily amenable to treatment and require research which is conducted at the Lawrence Experiment Station. To obtain information on the condition of our streams, 242 sampling stations have been established where samples are collected monthly from June to November, inclusive.

United States Public Law 660 provides for grants to states, municipalities and other political subdivisions to assist in the construction of sewerage systems. The Division is required to approve plans and specifications for proposed sewerage works and also guides local officials in the preparation of applications to obtain Federal assistance.

The Division has continued routine work on the examination of shellfish growing areas, on the control of aquatic growths for the elimination of nuisance conditions, and on the determination of the suitability of natural and artificial bodies of water for bathing places.

9

Community Sanitation. Section 150A of Chapter 111 of the General Laws as amended provides for an appeal to the Department from the assignment or operation of a refuse disposal area. As knowledge of this law becomes more widespread, an increasing number of complaints about the operation of dumps have been made to the Division, several of which have required a public hearing before departmental action.

The Division has continued to examine the source of water supply and sewage disposal facilities at recreational camps, trailer coach parks and overnight cabins (motels) as required by law. Advice has been given to local boards of health on the control of miscellaneous nuisances such as those caused by pigeries, mink farms, poultry farms and substandard housing.

During the past year increased emphasis has been placed on the sanitation of food service establishments. Need for this service is indicated by U.S. Public Health Service statistics which show that there continues to occur a significant number of outbreaks of food-borne disease. The services of sanitarians who formerly assisted the district engineers have been utilized for this function, adding to the already critical shortage of trained personnel to carry on the engineering activities of the Division.

Atmospheric Pollution - Radiological Health. The planning and construction of nuclear power plants, fuel element processing plants and the increasing use of radioactive materials in our hospitals, research institutions, educational institutions and industry have placed an increased burden on this section. Training of existing personnel, obtaining new qualified personnel and providing necessary equipment and facilities are urgently needed to enable the Division to meet its obligations in this rapidly expanding field.

TE

The Division operates a National Radiation Surveillance Network Sampling Station at the Lawrence Experiment Station in co-operation with the U.S. Public Health Service. It has initiated a survey of background levels of radioactivity of representative ground and surface water supplies throughout the State, and has continued a program of monitoring certain rivers for radioactivity.

Air flow studies have been made and air sampling stations have been established in connection with the installation of nuclear reactors in the State.

The Division has participated in special investigations such as the disposal of radioactive wastes at sea, and accidental spills of radioactive materials. As required by legislative resolves, the Division prepared a report on "Regulatory and Protective Measures Pertaining to Radioactive Materials".

Activities of the Division of Smoke Inspection were continued, with 1457 plant inspections made and 238 complaints investigated and settled.

Lawrence Experiment Station. The Lawrence Experiment Station continues to serve both as an analytical laboratory for water, sewage, air and industrial waste analysis and as a research institution. The bacteriological laboratory examines samples from public and semi-public water supplies, shellfish and overlying sea waters and bathing places. The chemical laboratory analyzes routinely samples of water from public and semi-public supplies, from streams and from sewage and industrial waste treatment plants. The air pollution-radiological laboratory has carried on the analytical work in connection with the activities of this section of the Division. Activities in this field have been hampered by a shortage of trained personnel and of equipment.

The Research Laboratory has continued its studies on methods of treatment of sewage, both old and new, particularly in regard to sewage containing industrial wastes. The Department has received a grant from the National Institutes of Health for intensive work in connection with the membrane filter, a method of bacteriological examination of water. This investigation is now in progress. The laboratory has also conducted studies of polarigraph determinations of dissolved oxygen in sludge, of the oxygen uptake values of various substances, and of methods for measuring efficiencies of sewage and waste treatment systems.

The Plumbing Laboratory has made studies of corrosion and other possible effects of exposure to sewage on various metal and plastic pipes. Installations made during the year permit visual study and demonstrations of back siphonage. A study on vacuum gages and other vacuum equipment has been started and a library of suitable motion pictures on plumbing is being created.

Civil Defense. All sections of the Division, including the Lawrence Experiment Station, have devoted some time to civil defense activities. The Division has conducted water works schools at the Topsfield Training Center. The staff participated in "Operation Alert '59" at State and Area Headquarters.



Division of Food and Drugs

Problems resulting from new developments in food processing and distribution, the abuse of harmful and narcotic drugs, the manufacture, sale and storage of frozen foods, and the tremendously expanding poultry processing industry continue to face this Division, resulting in some cases in lack of enforcement of the laws because of limited staff. Similarly, local health department budgets are being reduced to such a degree that work formerly held to be their prime responsibility is being neglected.

The proper labeling of household products that may be classified as "hazardous" or "poisonous" is receiving considerable attention. Chemical additives in food cover a vast field and should receive more attention than our chemists have been able to give them.

The milk inspection program of the Commonwealth, which under normal conditions seemed to be functioning properly, proved to be highly inadequate for the protection of the public health under the stress of a milk price war. It was definitely determined that milk from uninspected sources was reaching plants which provided pasteurized milk for the consumption of the Massachusetts public. The Department found itself helpless to cope with this problem since authority for enforcement of the laws concerning out-of-state pasteurization plants and in-state and out-of-state milk plants and receiving stations is the responsibility of the Massachusetts Department of Agriculture. This Department has jurisdiction over in-state pasteurization plants.

The responsibilities added by these increasing problems must be coped with along with routine problems concerned with regulating the milk and frozen dessert industries; the bedding and furniture industries; the soft drink industry, including carbonated beverages; the cold storage industry; and the Pandora's Box of problems arising from regulating hundreds of small bakeries and restaurants in the Commonwealth.

The Division is planning a series of conferences with food distributors, the goal being to bring about proper procedures in the distribution of frozen foods. This will be a long-range program since much equipment must necessarily be acquired by the distributors in order to comply with these procedures.

Remarkable strides have been made in the enforcement of the narcotic and harmful drug laws with the assistance of the several law enforcement agencies of the Commonwealth, the Attorney General and the District Attorneys.

Representatives of this Division have cooperated with the poultry industry, the Massachusetts Farm Bureau and the Department of Agriculture, and further attempts will be made to form a Section of Poultry Inspection within the Division.

In the last ten years thirty laws whose enforcement is part of the duties of the Division of Food and Drugs have been enacted by the Legislature and the staff of the Division is attempting to carry out a reasonable program for the protection of consumers of the Commonwealth in their purchases of foods and drugs.

Respectfully submitted,

ALFRED L. FRECHETTE
Alfred L. Frechette, M.D., M.P.H.
Commissioner of Public Health

GORDON M. FAIR
Gordon M. Fair, B.S., Dr.Ing.

WILLIAM H. GRIFFIN
William H. Griffin, D.M.D.

PAUL J. JAKMAUH
Paul J. Jakmauh, M.D.

RAYMOND L. MUTTER
Raymond L. Mutter, B.S.

CONRAD WESSELHOEFT
Conrad Wesselhoeft, M.D.

CHARLES F. WILINSKY
Charles F. Wilinsky, M.D.

Public Health Council

